

ICMJE Form for Disclosure of Potential Conflicts of Interest

Instructions

The purpose of this form is to provide readers of your manuscript with information about your other interests that could influence how they receive and understand your work. The form is designed to be completed electronically and stored electronically. It contains programming that allows appropriate data display. Each author should submit a separate form and is responsible for the accuracy and completeness of the submitted information. The form is in six parts.

1. Identifying information.

2. The work under consideration for publication.

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4. Intellectual Property.

This section asks about patents and copyrights, whether pending, issued, licensed and/or receiving royalties.

5. Relationships not covered above.

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Other: Anything not covered under the previous three boxes

Pending: The patent has been filed but not issued

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Licensed: The patent has been licensed to an entity, whether earning royalties or not

Royalties: Funds are coming in to you or your institution due to your patent

ICMJE Form for Disclosure of Potential Conflicts of Interest

Section 1. Identifying Information

1. Given Name (First Name)
Michael

2. Surname (Last Name)
Milano

3. Date
18-March-2020

4. Are you the corresponding author? Yes No

5. Manuscript Title
Oligometastases: History of a hypothesis

6. Manuscript Identifying Number (if you know it)
APM-20-470

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Royalties from Wolters Kluwer (not relevant to submitted work); Honorarium from Galera Therapeutics (not relevant to submitted work)

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Section 6. Disclosure Statement

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Dr. Milano reports and Royalties from Wolters Kluwer (not relevant to submitted work); Honorarium from Galera Therapeutics (not relevant to submitted work).

Evaluation and Feedback

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Section 1. Identifying Information

1. Given Name (First Name)
Tithi

2. Surname (Last Name)
Biswas

3. Date
20-March-2020

4. Are you the corresponding author? Yes No Corresponding Author's Name _____

5. Manuscript Title
'Oligometastasis- Fallacy or Real Deal?'

6. Manuscript Identifying Number (if you know it)

Section 2. The Work Under Consideration for Publication

Did you or your institution **at any time** receive payment or services from a third party (government, commercial, private foundation, etc.) for any aspect of the submitted work (including but not limited to grants, data monitoring board, study design, manuscript preparation, statistical analysis, etc.)?

Are there any relevant conflicts of interest? Yes No

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Are there any relevant conflicts of interest? Yes No

If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Galera Therapeutics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Honorium

Section 4. Intellectual Property -- Patents & Copyrights

Do you have any patents, whether planned, pending or issued, broadly relevant to the work? Yes No

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Section 5. Relationships not covered above

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Dr. Biswas reports other from Galera Therapeutics, outside the submitted work; .

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Section 1. Identifying Information

1. Given Name (First Name) Charles	2. Surname (Last Name) Simone	3. Date 18-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Michael Milano
5. Manuscript Title Oligometastases: History of a Hypothesis		
6. Manuscript Identifying Number (if you know it) APM-20-470		

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Dr. Simone has nothing to disclose.

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1. Given Name (First Name) Simon	2. Surname (Last Name) Lo	3. Date 18-March-2020
4. Are you the corresponding author?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Corresponding Author's Name Michael Milano
5. Manuscript Title Oligometastases: History of a hypothesis		
6. Manuscript Identifying Number (if you know it)		

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If yes, please fill out the appropriate information below.

Name of Entity	Grant?	Personal Fees?	Non-Financial Support?	Other?	Comments
Elekta AB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Research Support to Institution, Elekta Gamma Knife ICON Expert Group

Section 4. Intellectual Property -- Patents & Copyrights

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Dr. Lo reports other from Elekta AB, outside the submitted work; .

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